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]	PATENT AI	PPLICATION	FEE DE	•	Ap	plication or I	Docket T	Number					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OR SMALL ENTITY					
FOR NUMBER FILED NUMBER EXTRA						RA	TE	FEE		RATE	FEE		
1.5%				İ			1.22						
BASIC FEE (37 CFR 1.16(a))					s		OR		s 7 10				
TOTAL CLAIMS (37 CFR 1.16(c)) minus			20 = * (0= * 0			x \$=		x \$=				
	INDEPENDENT CLAIMS (37 CFR 1.16(b)) 3 minu			s3= * (5		OR	x=					
		DENT CLAIM PRE	SENT (37 C	CFR 1.16(d))		+	_=		OR	+=			
* If the	difference in colum		TO	ΓAL		OR	TOTAL	210					
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY OR SMALL EN			ŀ			
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	x \$	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total (37 CFR 1.16(c))	*	Minus	**	=		=		OR	x \$=			
	Independent (37 CFR 1.16(b))	*	Minus	***	=		_=		OR OR	x=			
<	FIRST PRES	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							OR	+=			
(Column 1) (Column 2) (Column 3)							TAL FEE		OR	TOTAL DDIT. FEE			
IENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE x \$	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total (37 CFR 1.16(e))	*	Minus	**	=				OR	x \$=			
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x_	=		OR OR	x=			
⁴	FIRST PRF	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))											

		(Column 1)		(Column 2)	(Column 3)	TOTA ADDIT. FEI		OR A		
MENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$	=	OR OR OR	x \$=	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x	=		x=	
\	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						=	OR	+=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							AL E	OR	TOTAL ODIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

6 2899818

		CLAIMS AS	FILED - (Column		-	(Column 2)		SMALL ENTITY TYPE		OR	OTHER THA	
TOTAL CLAIMS								RATE	FEE	1	RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	│		• /			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	3 mir	nus 3 =	* -			X40=	-	OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	s less than zero, enter "0" in column 2					TOTAL	-	OR	TOTAL	710! -
	CI	LAIMS AS A	MENDED	ENDED - PART II					,	J	OTHER	THAN
		(Column 1)		(Colu		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus			=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
					TOTAL		OR	TOTAL				
		(Column 1)		,	ADDIT. FEE	. :	1	ADDIT. FEE				
_	,	CLAIMS		(Colu	IEST	,			ADDI-			ADDI-
AMENDMENT B	٠	REMAINING AFTER AMENDMENT	i companiente de la companiente della companient	PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		<u> </u> =		X40=		OR	X80=	·-
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDEN	CLAIM		ا ا	+135=		OR	+270=	
			L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE					
		(Column 1)		(Colu		(Column 3)	_ ′			•	7.0011.1 221	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST BBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	"
	Independent	*	Minus	***	** = IDENT CLAIM [X40=		OR	X80=	
<u> </u>	FIRST PRESE	CLAIM		,	+135=		OR	+270=				
		mn 1 is less than t					, L	TOTAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												